ORIGINAL - Submit to carrier
DUPLICATE - Retain in your possession for 8 days

Driver's Daily Log

NOTE: All entries must be neatly printed in blocks. Use blue or black ink only.

BRUCE A	LUEBKE	203596
(Driver First Name)	(Driver Last Name)	(Driver ID NUMBER)
(Co-Driver First Name)	(Co-Driver Last Name)	(Co-Driver ID NUMBER)

Select Company

- [ ] FFE TRANSPORTATION SERVICES
- [ ] NORDIC TRUCKING
- [ ] L & H LOGISTICS
- [x] LISA MOTOR LINES
- [ ] AMERICAN EAGLE LINES
- [ ] GREAT WESTERN EXPRESS

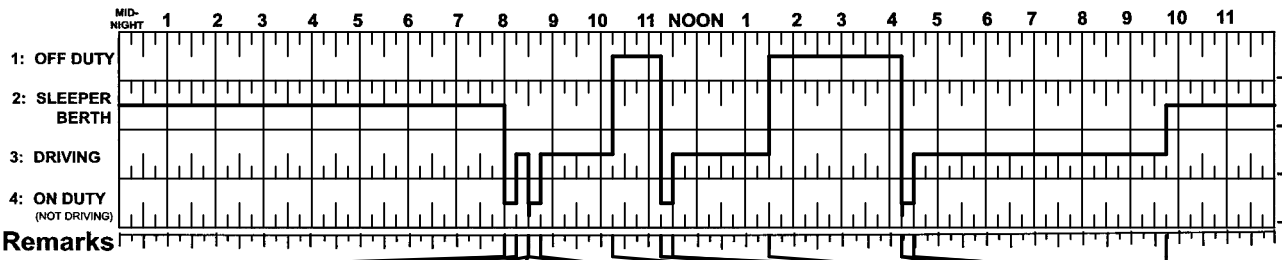
649 (Total Miles Driving Today)

4 23 2008 (Month) (Day) (Year)

If multiple off-duty days, enter end date here:

20 (Month) (Day) (Year)

Main Office Address: Dallas, Texas



	TOTAL HOURS
1: OFF DUTY	3.75
2: SLEEPER BERTH	10.25
3: DRIVING	9.
4: ON DUTY (NOT DRIVING)	1.
	24.00

1/4 = 0.25
1/2 = 0.50
3/4 = 0.75

Hours Worked Last 7 Days	
1.	0.00
2.	12.00
3.	8.25
4.	8.50
5.	11.50
6.	7.50
7.	3.00
Yesterday Total Hours	50.75
70 Hours Less Total Hours Equals Hours Available Today	19.25
Hours Worked Today	10.00

If Hours Worked Today Exceeds Hours Available You Are In Violation.

Remarks

Pine Bluffs WY - Post Trip Vehicle Inspection - Walk Around
Fort Bridger WY - Reefer Fuel: 26.130 Gal, Odometer: 154554.9 TA
Fort Bridger WY
Fort Bridger WY
Springville UT 154409.5 UT 5000585 67655 NESSPA LOADED
Springville UT - Shipper Load & Count - Pre Trip Vehicle Inspection 67655 11191
Springville UT - Post Trip Vehicle Inspection - Walk Around
Ogden UT
Ogden UT - Reefer Fuel: 18.016 Gal, Odometer: 154274.6 Pilot # 294
Ogden UT Fuel: 154.067 Gal, Odometer: 154274.6 Pilot # 294
Ogden UT 154266.8 UT 5000585 67655 AFSSL1 DEADHEAD
Farr West UT 154266.8 UT 5000266 67655 ASSL1 EMPTY
Farr West UT - Lumper Unloaded and Driver and Receiver Counted - Pre Trip Vehicle Inspection 67655 26535

Shipping Documents

Stop #90 -- 0474072
(B/L or Manifest Number)

676555
(Tractor Number)

Bruce A. Luebke
(Driver's Signature in Full)
I certify these entries are true and correct.

26535 (Trailer Number 1)

111191 (Trailer Number 3)

4 23 2008 (Month) (Day) (Year)

Driver's Daily Vehicle Inspection

Directions: Fill box of any defective item and give details under "Remarks"

Tractor

- [x] **No Defects**
- [ ] Parking Brake
- [ ] Brakes
- [ ] Clutch
- [ ] Cooling System
- [ ] Coupling Devices
- [ ] Emergency Equip.
- [ ] Heat-Defroster
- [ ] Horn
- [ ] Lights-Reflectors
- [ ] Rear View Mirrors
- [ ] Oil Pressure
- [ ] Speedometer
- [ ] Tires
- [ ] Wheels & Rims
- [ ] Windshield Wipers
- [ ] Physical Damage
- [ ] Other (Give Details)

Remarks:

Trailer(s)

- [x] **No Defects**
- [ ] Parking Brake
- [ ] Brakes
- [ ] Coupling Devices
- [ ] Landing Gear
- [ ] Lights-Reflectors
- [ ] Physical Damage
- [ ] Tires
- [ ] Wheels & Rims
- [ ] Other (Give Details)

Remarks: (Identify by trailer number if more than one trailer used)

I have inspected the above equipment and indicated all noticeable defects.

Bruce A. Luebke

Driver's Signature:

- [ ] **Corrections not necessary for safe operation of vehicle.**
- [ ] Above defects corrected.

Repairman's Signature:

I have reviewed this report and determined that repairman has certified that all necessary repairs have been completed.

Driver's Signature: